

UNITED STATES DISTRICT COURT
Eastern District of New York

Mario A. Fuller
11-11 Hazen St
East Elmhurst NY 11370

(In the space above enter the full name(s) of the plaintiff(s).)

FILED
IN CLERK'S OFFICE
U.S. DISTRICT COURT, E.D.N.Y.

★ JUN 20 2006 ★

BROOKLYN OFFICE

PERSONAL

COMPLAINT

under the

Civil Rights Act, 42 U.S.C. § 1983

v.

Defendant No. 1

LT. Gramble

Defendant No. 2

77th Precinct

Defendant No. 3

John Doe

Defendant No. 4

John Doe

Defendant No. 5

John Doe

Jury Trial: Yes ☒ No ☐
(check one)

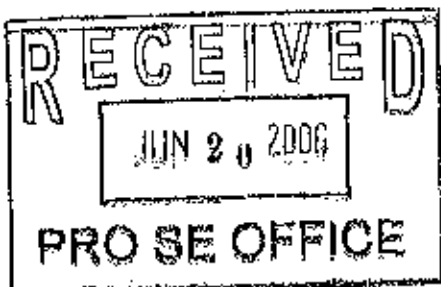
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(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. No addresses should be included here.)



I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Mario A. Fuller
ID # 113-060-1072
Current Institution R.N.D.C
Address 11-11 Hazen St
East Elmhurst, NY 11370

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name LT. Gamble Shield # _____
 Where Currently Employed 77th Precinct
 Address _____

Defendant No. 2 Name John Doe Shield # _____
 Where Currently Employed 77th precinct
 Address _____

Defendant No. 3 Name John Doe Shield # _____
 Where Currently Employed 77th precinct
 Address _____

Defendant No. 4 Name John Doe Shield # _____
 Where Currently Employed 77th precinct
 Address _____

Defendant No. 5 Name John Doe Shield # _____
 Where Currently Employed 77th precinct
 Address _____

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. In what institution did the events giving rise to your claim(s) occur? 77th precinct
- B. Where in the institution did the events giving rise to your claim(s) occur? _____
- C. What date and approximate time did the events giving rise to your claim(s) occur? 4/01/05

What
happened
to
you?

D. Facts: I was in the store buying beer. I was stopped on the way out by a male white officer. Another individual was stopped coming out the store. We were checked. I had nothing on me, but the other individual was in possession of crack cocaine. We were transported to the Precinct and stripped search. I was in full compliance. The officers held me down cuffed and shackled me and did a Cavity search.

Who
did
what?

LT. Gambel allegedly said he did the search. He lied it wasn't him he just authorized the search. Who came testified at an hearing claiming he did but he didn't.

Was
anyone
else
involved?

Yes The officer who actually handle the search can be ID. Because they harass me on the streets.

Who
else
saw
what
happened?

Eight officers had me pent down while I was hollering and screaming. I believe the Commanding officer had to witness it being that he authorized it. The hold precinct heard me screaming for my life and did nothing.

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. Yes I recieved medical treatment at St. Marys Hospital when I was released. Injuries was anal pain, anal spasm, rectum discomfort. On and of rectum pain. Prescription was given by Physician 600mg pain killers.

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act of 1995, 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☐ No ☒

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s). At 7th precinct in the bullpen

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes ___ No ___ Do Not Know ___ N/A

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes ___ No ___ Do Not Know ___ N/A

If YES, which claim(s)?

D. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose not cover some of your claim(s)?

Yes ___ No ___ Do Not Know ___ N/A

If YES, which claim(s)?

E. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes ___ No ___ N/A

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ___ No ___ N/A

F. If you did file a grievance, about the events described in this complaint, where did you file the grievance? N/A

1. Which claim(s) in this complaint did you grieve? N/A

2. What was the result, if any? N/A

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. N/A

G. If you did not file a grievance, did you inform any officials of your claim(s)?

Yes _____ No _____

1. If YES, whom did you inform and when did you inform them? N/A

2. If NO, why not? N/A

1. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. N/A

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. **Relief:**

State what you want the court to do for you.

N/A I would like for these particular officers brought to justice for no one can be subjected to that type of treatment I've been through. And I don't think that's fair that the judge allowed and permitted this action to proceed in court I want justice.

VI. **Previous lawsuits:**

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes _____ No /

On
these
claims

B. If your answer to A is YES, describe each lawsuit in questions 1 through 7 on the next page. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to this previous lawsuit:
 Plaintiff N/A
 Defendants N/A
2. Court (if federal court, name the district; if state court, name the county) N/A
3. Docket or Index number N/A
4. Name of Judge assigned to your case N/A
5. Approximate date of filing lawsuit N/A
6. Is the case still pending? Yes No N/A
 If NO, give the approximate date of disposition
7. What was the result of the case? (for example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) N/A

On
other
claims

D. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?
 Yes No X

E. If your answer to D is YES, describe each lawsuit in questions 1 through 7 on the next page. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to this previous lawsuit:
 Plaintiff N/A
 Defendants N/A
2. Court (if federal court, name the district; if state court, name the county) N/A
3. Docket or Index number N/A
4. Name of Judge assigned to your case N/A
5. Approximate date of filing lawsuit: N/A
6. Is the case still pending? Yes No N/A
 If NO, give the approximate date of disposition N/A
7. What was the result of the case? (for example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) N/A

Mr Mario Fuller
R.N.D.C 11-11 Hazen St.
East Elmhurst, NY 11370

I reported the incident to Internal Affairs they brought photos of eight officers for me to ID, none of the officers in the photos wasn't the officers that violated my constitutional rights. Lt. Gamble was one of the photos that I saw, I didn't recognize him, because he wasn't the officer who did the actual search. He was the officer that authorized the search. He came to my court hearings and, testified under oath and said that he searched me. In all actuality he wasn't. I can ID the officers who did the actual search. I know them personally, because they harass all the time. I was forced to plea bargain because I was afraid that I might have blown trial going up against a decorated officer. Please I would like for these particular officers brought to justice for no one can be subjected to what I've been through.

*Sworn to before me
on June 27, 2006*

RESPECTFULLY SUBMITTED

Mario Fuller

Celia Uehara
CELIA UEHARA
Notary Public, State of New York
No. 01064910076
Qualifying in Queens County
Commission Expires on 11/04/2009

Signed this 17 day of June, 2006 I declare under penalty of perjury that the foregoing is true and correct.

Signature of Plaintiff

Inmate Number

Mailing address

Mario A. Fuller
113-060-1072
1111 Hazen st
East Elmhurst, Ny
11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 17 day of June, 2006 I will deliver this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Mario Fuller

Sworn to before me
on June 17, 2006

Celia Uehara
CELIA UEHARA
Notary Public, State of New York
No. 01UE4910076
Qualifying in Queens County
Commission Expires on 11/04/2009

rev. 08/04